

# GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

**FORM GPAC  
COVER SHEET PG 1**

|   |  |   |  |
|---|--|---|--|
| <b>The GPAC Instruction Guide explains how to complete this form.</b>                         |  | <b>1 Filer ID</b><br>(Ethics Commission Filers)<br>00087479 | <b>2 Total pages filed:</b><br>8                                       |
| <b>3 COMMITTEE NAME</b><br>BETTER SA PAC  |  | <b>OFFICE USE ONLY</b>                                      |  |
|   |  | Date Received<br>ELECTRONICALLY FILED<br>07/17/2023         |  |
| <b>4 COMMITTEE ADDRESS</b><br><br><input type="checkbox"/> Change of Address                  | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br>3510 N St. Mary's, Ste. 300<br><br>San Antonio, TX 78212 |   |  |
|   | Date Hand-delivered or Date Postmarked   |   |  |
|   | Receipt #  | Amount  |  |
|   | Date Processed   |   |  |
|   |  | Date Imaged   |  |
| <b>5 CAMPAIGN TREASURER NAME</b>  | MS / MRS / MR  | FIRST   | MI   |
|   |  | Cabell  |  |
|   |  | NICKNAME  | LAST SUFFIX  |
|   |  |   | Hobbs  |
| <b>6 CAMPAIGN TREASURER STREET ADDRESS</b><br><small>(Residence or Business)</small>          | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  |   |  |
|   | 14425 Falcon Head Blvd.<br>BLDG E-100<br>Austin, TX 78738  |   |  |
| <b>7 CAMPAIGN TREASURER MAILING ADDRESS</b><br><br><input type="checkbox"/> Change of Address | STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE   |   |  |
|   | PO Box 341027<br><br>Austin, TX 78734  |   |  |
| <b>8 CAMPAIGN TREASURER PHONE</b>   | AREA CODE  | PHONE NUMBER  | EXTENSION  |
|   | (702)  | 900-4467  |  |
| <b>9 REPORT TYPE</b>  | <input type="checkbox"/> January 15  | <input type="checkbox"/> 30th day before election           | <input type="checkbox"/> Dissolution (Attach PAC-DR)                   |
|   | <input checked="" type="checkbox"/> July 15  | <input type="checkbox"/> 8th day before election            | <input type="checkbox"/> 10th day after campaign treasurer termination |
|   |  | <input type="checkbox"/> Runoff                             |  |
|   |  |   |  |
| <b>10 PERIOD COVERED</b>  | Month Day Year   | THROUGH   | Month Day Year   |
|   | 04/27/2023   |   | 06/30/2023   |
| <b>11 ELECTION</b>  | ELECTION DATE  | ELECTION TYPE   |  |
|   | Month Day Year   | <input type="checkbox"/> Primary                            | <input type="checkbox"/> Runoff <input type="checkbox"/> Other         |
|   | 05/06/2023   | <input checked="" type="checkbox"/> General                 | <input type="checkbox"/> Special                                       |

**GO TO PAGE 2**

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**  
COVER SHEET PG 2

|   |   |
|---|---|
| <b>12 COMMITTEE NAME</b><br>BETTER SA PAC | <b>13 Filer ID</b> (Ethics Commission Filers)<br>00087479 |
|---|---|

|   |  |  |
|---|--|--|
| <b>14 COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.) | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)             | A. Supported    Marc Whyte    San Antonio City Council |
|   |  | B. Opposed   |
|   | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)       | A. Supported   |
|   |  | B. Opposed   |
|   | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.) |  |

|                               |   |    |           |
|-------------------------------|---|----|-----------|
| <b>15 CONTRIBUTION TOTALS</b> | <b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b><br><input type="checkbox"/> check here if this report qualifies for the higher itemization threshold | \$ | 0.00      |
|                               | <b>2. TOTAL POLITICAL CONTRIBUTIONS</b><br>(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  | \$ | 0.00      |
| EXPENDITURE TOTALS            | <b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>   | \$ | 58.63     |
|                               | <b>4. TOTAL POLITICAL EXPENDITURES</b>  | \$ | 14,941.28 |
| CONTRIBUTION BALANCE          | <b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>   | \$ | 46.23     |
| OUTSTANDING LOAN TOTALS       | <b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>  | \$ | 0.00      |

**16 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

\_\_\_\_\_  
 Cabell Hobbs  
 Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
 Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

|   |  |  |
|---|--|--|
| <b>12 COMMITTEE NAME</b><br>BETTER SA PAC   |  | <b>13 Filer ID</b> (Ethics Commission Filers)<br>00087479                      |
| <b>14 COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.) | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)             | A. Supported Marina Alderete Gavito San Antonio City Council<br><br>B. Opposed |
|   | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)       | A. Supported<br><br>B. Opposed   |
|   | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.) |  |
|   | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)             | A. Supported Phyllis Viagran San Antonio City Council<br><br>B. Opposed        |
|   | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)       | A. Supported<br><br>B. Opposed   |
|   | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.) |  |
| <b>COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.)    | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)             | A. Supported Melissa Cabello-Havrda San Antonio City Council<br><br>B. Opposed |
|   | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)       | A. Supported<br><br>B. Opposed   |
|   | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.) |  |

**SUBTOTALS - GPAC****FORM GPAC**  
**COVER SHEET PG 3**  
4 of 8

|  |   |   |
|--|---|---|
| <b>17</b> COMMITTEE NAME<br>BETTER SA PAC        |   | <b>18</b> Filer ID (Ethics Commission Filers)<br>00087479 |
| <b>19</b> SCHEDULE SUBTOTALS<br>NAME OF SCHEDULE |   | SUBTOTAL AMOUNT   |
| 1.   | <input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS  | \$  |
| 2.   | <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                              | \$  |
| 3.   | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS  | \$  |
| 4.   | <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION               | \$  |
| 5.   | <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$  |
| 6.   | <input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION                     | \$  |
| 7.   | <input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION                 | \$  |
| 8.   | <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION                 | \$  |
| 9.   | <input type="checkbox"/> SCHEDULE E: LOANS  | \$  |
| 10.  | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS              | \$ 14,941.28  |
| 11.  | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS   | \$  |
| 12.  | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS                        | \$  |
| 13.  | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD  | \$  |
| 14.  | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                      | \$  |
| 15.  | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER       | \$  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|   |  |  |
|---|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 1/4 Rpt: 5/8  | <b>2</b> FILER NAME<br>BETTER SA PAC   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087479   |
| <b>4</b> Date<br>04/27/2023   | <b>5</b> Payee name<br>McShane LLC   |  |
| <b>6</b> Amount (\$)<br>\$1,501.50<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>6950 Obannon Dr., Ste. 100<br><br>Las Vegas, NV 89117 |  |
| <b>8</b> PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)                                | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Video Production |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                 | Candidate/Officeholder name<br>Whyte, Marc   | Office sought<br>San Antonio City Council District   |
| Date<br>04/27/2023  | Payee name<br>McShane LLC  |  |
| Amount (\$)<br>\$2,250.00<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>6950 Obannon Dr., Ste. 100<br><br>Las Vegas, NV 89117          |  |
| <b>PURPOSE OF EXPENDITURE</b>   | <b>(a)</b> Category (See Categories listed at the top of this schedule)                                | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Facebook Video   |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name<br>Whyte, Marc   | Office sought<br>San Antonio City Council District   |
| Date<br>04/27/2023  | Payee name<br>McShane LLC  |  |
| Amount (\$)<br>\$1,501.50<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>6950 Obannon Dr., Ste. 100<br><br>Las Vegas, NV 89117          |  |
| <b>PURPOSE OF EXPENDITURE</b>   | <b>(a)</b> Category (See Categories listed at the top of this schedule)                                | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Video Production |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name<br>Mariana Alderete, Gavito  | Office sought<br>San Antonio City Council District   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|   |  |  |
|---|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 2/4 Rpt: 6/8  | <b>2</b> FILER NAME<br>BETTER SA PAC   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087479   |
| <b>4</b> Date<br>04/27/2023   | <b>5</b> Payee name<br>McShane LLC   |  |
| <b>6</b> Amount (\$)<br>\$2,250.00<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>6950 Obannon Dr., Ste. 100<br><br>Las Vegas, NV 89117 |  |
| <b>8</b> PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)                                | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Facebook Video   |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                 | Candidate/Officeholder name<br>Gavito, Marina Alderete   | Office sought<br>San Antonio City Council District   |
| Date<br>05/04/2023  | Payee name<br>McShane LLC  |  |
| Amount (\$)<br>\$1,000.00<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>6950 Obannon Dr., Ste. 100<br><br>Las Vegas, NV 89117          |  |
| <b>PURPOSE OF EXPENDITURE</b>   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense         | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Texting Service (DCE Expenditure, \$250 per candidate) |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name<br>Viagran, Phyllis  | Office sought<br>San Antonio City Council District   |
| Date  | Payee name<br>(see previous)   |  |
| Amount (\$)<br><br><input type="checkbox"/> Expenditure from corporate funds                        | Payee address; City; State; Zip Code   |  |
| <b>PURPOSE OF EXPENDITURE</b>   | <b>(a)</b> Category (See Categories listed at the top of this schedule)                                | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense   |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name<br>Garcia, Adriana Rocha   | Office sought<br>San Antonio City Council District   |
|   |  | Office held<br>San Antonio City Council District   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|  |                                      |  |
|--|--------------------------------------|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 3/4 Rpt: 7/8 | <b>2</b> FILER NAME<br>BETTER SA PAC | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087479 |
|--|--------------------------------------|--|

|               |                                       |
|---------------|---------------------------------------|
| <b>4</b> Date | <b>5</b> Payee name<br>(see previous) |
|---------------|---------------------------------------|

|   |   |
|---|---|
| <b>6</b> Amount (\$)                                      | <b>7</b> Payee address; City; State; Zip Code |
| <input type="checkbox"/> Expenditure from corporate funds |   |

|                                 |   |  |
|---------------------------------|---|--|
| <b>8</b> PURPOSE OF EXPENDITURE | <b>(a)</b> Category (See Categories listed at the top of this schedule) | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense |
|---------------------------------|---|--|

|   |  |  |  |
|---|--|--|--|
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>Cabello-Havrda, Melissa | Office sought<br>San Antonio City Council District | Office held<br>San Antonio City Council District |
|---|--|--|--|

|      |                              |
|------|------------------------------|
| Date | Payee name<br>(see previous) |
|------|------------------------------|

|   |                                      |
|---|--------------------------------------|
| Amount (\$)   | Payee address; City; State; Zip Code |
| <input type="checkbox"/> Expenditure from corporate funds |                                      |

|                               |   |  |
|-------------------------------|---|--|
| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule) | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense |
|-------------------------------|---|--|

|  |  |  |  |
|--|--|--|--|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>Pelaez, Manny | Office sought<br>San Antonio City Council District | Office held<br>San Antonio City Council District |
|--|--|--|--|

|                    |                                    |
|--------------------|------------------------------------|
| Date<br>06/05/2023 | Payee name<br>RightSide Compliance |
|--------------------|------------------------------------|

|   |   |
|---|---|
| Amount (\$)<br>\$330.00                                   | Payee address; City; State; Zip Code<br>PO Box 341027<br><br>Austin, TX 78734 |
| <input type="checkbox"/> Expenditure from corporate funds |   |

|                               |   |   |
|-------------------------------|---|---|
| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Consulting Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Compliance Consulting |
|-------------------------------|---|---|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

|  |  |
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|  |  |
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|   |   |   |
|---|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 4/4 Rpt: 8/8  | <b>2</b> FILER NAME<br>BETTER SA PAC  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087479  |
| <b>4</b> Date<br>05/04/2023   | <b>5</b> Payee name<br>RightSide Compliance   |   |
| <b>6</b> Amount (\$)<br>\$1,589.65<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>PO Box 341027<br><br>Austin, TX 78734        |   |
| <b>8</b> PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Consulting Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Compliance Consulting     |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH  | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>06/05/2023  | Payee name<br>The Gober Group PLLC  |   |
| Amount (\$)<br>\$605.00<br><br><input type="checkbox"/> Expenditure from corporate funds            | Payee address; City; State; Zip Code<br>PO Box 341016<br><br>Austin, TX 78734                 |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Legal Services     | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Legal Consulting Services |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>05/03/2023  | Payee name<br>The Gober Group PLLC  |   |
| Amount (\$)<br>\$3,855.00<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>PO Box 341016<br><br>Austin, TX 78734                 |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Legal Services     | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Legal Consulting Services |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name   | Office sought Office held   |